

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Constitutional Conservatives

ADDRESS (number and street)

228 S Washington Street

Suite 115

Check if different
than previously
reported. (ACC)

Alexandria

VA

22314

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00620120

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report (Q1)July 15
Quarterly Report (Q2)October 15
Quarterly Report (Q3)January 31
Year-End Report (YE)July 31 Mid-Year
Report (Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

[]

(d) 30-Day
POST-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

[]

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Satterfield, David, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Satterfield, David, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Constitutional Conservatives

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
08 / 11 / 2016 To: M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	7763.18	
(c) Total Receipts (from Line 19)	134000.00	195000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	141763.18	195000.00
7. Total Disbursements (from Line 31)	123732.95	176969.77
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	18030.23	18030.23
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	122137.50	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Constitutional Conservatives

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
08		11		2016

To:

M M	/	D D	/	Y Y Y Y Y Y
09		30		2016

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

132000.00

193000.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

132000.00

193000.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

2000.00

2000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

134000.00

195000.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))

134000.00

195000.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

134000.00

195000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1487.20	13891.52
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1487.20	13891.52
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	122245.75	163078.25
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	123732.95	176969.77
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	123732.95	176969.77

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	134000.00	195000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	134000.00	195000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	1487.20	13891.52
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	1487.20	13891.52

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Constitutional Conservatives

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Allen Concrete and Masonry

Mailing Address 6301 Shirley St

City
Naples

State
FL

Zip Code
34109

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 22 / 2016

Transaction ID : SA11AI.4234

Amount of Each Receipt this Period

11000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BCH Mechanical Inc

Mailing Address 6354 118th Ave N

City
Largo

State
FL

Zip Code
33773

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2016

Transaction ID : SA11AI.4218

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bodman, Richard, , ,

Mailing Address 3007 Rum Row

City
Naples

State
FL

Zip Code
34102

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

VMS Group

Venture Capital

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2016

Transaction ID : SA11AI.4216

Amount of Each Receipt this Period

20000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

32000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Constitutional Conservatives

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Icarus Capital LLC

Mailing Address 19 NE 50th St

City

Oklahoma City

State

OK

Zip Code

73105

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

08 / 16 / 2016

Transaction ID : SA11AI.4228

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kelly, Jack, , ,

Mailing Address 3645 Kanawha St NW

City

Washington

State

DC

Zip Code

20015

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
McPherson Group, LLP

Occupation (for Individual)
Founding Partner

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

08 / 12 / 2016

Transaction ID : SA11AI.4220

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Moore, Donna, , ,

Mailing Address 8976 Crooked Stick Ct

City

Naples

State

FL

Zip Code

34113

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Homemaker

Occupation (for Individual)
Homemaker

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

08 / 12 / 2016

Transaction ID : SA11AI.4222

Amount of Each Receipt this Period

25000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Constitutional Conservatives

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Neira, Linda, , ,

Mailing Address 613 Sturtz Cir

City
Norman

State
OK

Zip Code
73072

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Equipment Preference Inc

Occupation (for Individual)

Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 12 / 2016

Transaction ID : SA11AI.4224

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Page Mechanical Group Inc

Mailing Address 4611 Cummins Court

City

Fort Myers

State

FL

Zip Code

33905

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 24 / 2016

Transaction ID : SA11AI.4236

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Storm Smart Building Systems Inc

Mailing Address 6182 Idlewild St

City

Fort Myers

State

FL

Zip Code

33966

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 16 / 2016

Transaction ID : SA11AI.4230

Amount of Each Receipt this Period

5000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

25000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Constitutional Conservatives

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wayne Wiles Floorcoverings Inc

Mailing Address 7851 Supply Dr

City

Fort Myers

State

FL

Zip Code

33912

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 18 / 2016

Transaction ID : SA11AI.4232

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Webb, Mike, , ,

Mailing Address 4008 Putter Pl

City

Muskogee

State

OK

Zip Code

74403

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Manhattan Road and Bridge

Occupation (for Individual)
President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 12 / 2016

Transaction ID : SA11AI.4226

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30000.00

132000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 26

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Constitutional Conservatives

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GREAT AMERICAN FUND

Mailing Address PO BOX 83142

City
GAITHERSBURG

State
MD

Zip Code
20883

FEC ID number of contributing
federal political committee.

C C00432104

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

09 / **07** / **2016**

Transaction ID : SA11C.4239

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2000.00

2000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Constitutional Conservatives

Full Name (Last, First, Middle Initial)

A. Anedot

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Mailing Address P.O. Box 84314

City
Baton RougeState
LAZip Code
70884Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Category/
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C

Transaction ID : SB21B.4241

Amount of Each Disbursement this Period

1210.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BB&T

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2016

Mailing Address 300 S Washington Street

City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Bank Fee

Candidate Name

Category/
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C

Transaction ID : SB21B.4243

Amount of Each Disbursement this Period

180.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1390.20

1390.20

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 12 OF 26

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Constitutional Conservatives

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Dentons US LLPNature of Debt (Purpose):
Legal ServicesMailing Address 1301 K Street NW
Suite 600 East TowerCity
WashingtonState
DCZip Code
20005

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4261

Amount Incurred This Period

17500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

17500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Franklin, Caitlin, , ,Nature of Debt (Purpose):
Fundraising ConsultingMailing Address 107 S West Street
Suite 410City
AlexandriaState
VAZip Code
22314

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4263

Amount Incurred This Period

5000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Global StrikeNature of Debt (Purpose):
Media ProductionMailing Address 224 Datur Street
Suite 401City
West Palm BeachState
FLZip Code
33401

Outstanding Balance Beginning This Period

1600.00

Transaction ID : SD10.4195

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1600.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

24100.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 13 OF 26

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Constitutional Conservatives

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Global StrikeNature of Debt (Purpose):
Media ProductionMailing Address 224 Datur Street
Suite 401City
West Palm BeachState
FLZip Code
33401

Outstanding Balance Beginning This Period

6800.00

Transaction ID : SD10.4196

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6800.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Global StrikeNature of Debt (Purpose):
Media ProductionMailing Address 224 Datur Street
Suite 401City
West Palm BeachState
FLZip Code
33401

Outstanding Balance Beginning This Period

800.00

Transaction ID : SD10.4197

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

800.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Global StrikeNature of Debt (Purpose):
Website/PollingMailing Address 224 Datur Street
Suite 401City
West Palm BeachState
FLZip Code
33401

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4270

Amount Incurred This Period

14600.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

14600.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

22200.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 14 OF 26

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Constitutional Conservatives

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Global StrikeNature of Debt (Purpose):
Media ProductionMailing Address 224 Datur Street
Suite 401City
West Palm BeachState
FLZip Code
33401

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4254

Amount Incurred This Period

6000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Global StrikeNature of Debt (Purpose):
Media ProductionMailing Address 224 Datur Street
Suite 401City
West Palm BeachState
FLZip Code
33401

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4255

Amount Incurred This Period

6000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Global StrikeNature of Debt (Purpose):
Media PlacementMailing Address 224 Datur Street
Suite 401City
West Palm BeachState
FLZip Code
33401

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4256

Amount Incurred This Period

1500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

13500.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 15 OF 26

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Constitutional Conservatives

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Global StrikeNature of Debt (Purpose):
Media PlacementMailing Address 224 Datur Street
Suite 401City
West Palm BeachState
FLZip Code
33401

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4257

Amount Incurred This Period

4908.75

Payment This Period

0.00

Outstanding Balance at Close of This Period

4908.75

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Global StrikeNature of Debt (Purpose):
Media PlacementMailing Address 224 Datur Street
Suite 401City
West Palm BeachState
FLZip Code
33401

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4258

Amount Incurred This Period

4908.75

Payment This Period

0.00

Outstanding Balance at Close of This Period

4908.75

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Global StrikeNature of Debt (Purpose):
Voter Telephone CommunicationMailing Address 224 Datur Street
Suite 401City
West Palm BeachState
FLZip Code
33401

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4259

Amount Incurred This Period

2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

12317.50

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 16 OF 26

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Constitutional Conservatives

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Global Strike

Nature of Debt (Purpose):

Voter Telephone Communication

Mailing Address 224 Datur Street
Suite 401City
West Palm BeachState
FLZip Code
33401

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4260

Amount Incurred This Period

2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Huckaby Davis Lisker

Nature of Debt (Purpose):

FEC Compliance and Accounting

Mailing Address 228 S Washington Street
Suite 115City
AlexandriaState
VAZip Code
22314

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4265

Amount Incurred This Period

2520.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2520.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Herald Group

Nature of Debt (Purpose):

Media Placement

Mailing Address 1800 M Street NW

City
WashingtonState
DCZip Code
20036

Outstanding Balance Beginning This Period

5000.00

Transaction ID : SD10.4198

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

10020.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 17 OF 26

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Constitutional Conservatives

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Herald Group

Nature of Debt (Purpose):

Media Placement

Mailing Address 1800 M Street NW

City

Washington

State

DC

Zip Code

20036

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4251

Amount Incurred This Period

15000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Herald Group

Nature of Debt (Purpose):

Media Placement

Mailing Address 1800 M Street NW

City

Washington

State

DC

Zip Code

20036

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4252

Amount Incurred This Period

15000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Herald Group

Nature of Debt (Purpose):

Media Placement

Mailing Address 1800 M Street NW

City

Washington

State

DC

Zip Code

20036

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4253

Amount Incurred This Period

5000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

1) SUBTOTALS This Period This Page (optional)..... ►

35000.00

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 18 OF 26

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Constitutional Conservatives

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Herald Group

Nature of Debt (Purpose):
Digital Strategy Consulting

Mailing Address 1800 M Street NW

City
WashingtonState
DCZip Code
20036

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4269

Amount Incurred This Period

5000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

5000.00

2) **TOTALS** This Period (last page this line number only)..... ►

122137.50

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

122137.50

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 19 OF 26
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Constitutional Conservatives				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00620120 </div>										
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on MM / DD / YYYY														
Full Name of Payee <input type="checkbox"/> Memo Item Global Strike				Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 15 / 2016										
Mailing Address 224 Datur Street Suite 401				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">62620.00</div>										
City West Palm Beach		State FL	Zip Code 33401	Transaction ID : SE.4168 Date of Disbursement or Obligation MM / DD / YYYY 08 / 15 / 2016										
Purpose of Expenditure Media Placement			Category/ Type 004											
Name of Federal Candidate: <input type="checkbox"/> Support GOSS, CHAUNCEY, P, , <input checked="" type="checkbox"/> Oppose				Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL										
Calendar Year-To-Date Per Election for Office Sought 147652.50				Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶										
Full Name of Payee <input checked="" type="checkbox"/> Memo Item Global Strike				Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 15 / 2016										
Mailing Address 224 Datur Street Suite 401				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">6000.00</div>										
City West Palm Beach		State FL	Zip Code 33401	Transaction ID : SE.4288 Date of Disbursement or Obligation MM / DD / YYYY 08 / 15 / 2016										
Purpose of Expenditure Media Production			Category/ Type 004											
Name of Federal Candidate: <input type="checkbox"/> Support GOSS, CHAUNCEY, P, , <input checked="" type="checkbox"/> Oppose				Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL										
Calendar Year-To-Date Per Election for Office Sought 153652.50				Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶										
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">(a) SUBTOTAL of Itemized Independent Expenditures</td> <td style="width: 5%; text-align: center;">▶</td> <td style="width: 35%; border: 1px solid black; padding: 2px; text-align: right;">62620.00</td> </tr> <tr> <td>(a) SUBTOTAL of Unitemized Independent Expenditures</td> <td style="text-align: center;">▶</td> <td style="border: 1px solid black; padding: 2px; text-align: right;"></td> </tr> <tr> <td>(a) TOTAL Independent Expenditures</td> <td style="text-align: center;">▶</td> <td style="border: 1px solid black; padding: 2px; text-align: right;"></td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures	▶	62620.00	(a) SUBTOTAL of Unitemized Independent Expenditures	▶		(a) TOTAL Independent Expenditures	▶	
(a) SUBTOTAL of Itemized Independent Expenditures	▶	62620.00												
(a) SUBTOTAL of Unitemized Independent Expenditures	▶													
(a) TOTAL Independent Expenditures	▶													
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.														
Satterfield, David, , , [Electronically Filed] Signature				Date MM / DD / YYYY 10 / 14 / 2016										

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 20 OF 26
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Constitutional Conservatives				FEC IDENTIFICATION NUMBER ▼ C C00620120	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Global Strike			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 15 / 2016
Mailing Address 224 Datur Street Suite 401			Amount 6000.00		Transaction ID : SE.4297
City State Zip Code West Palm Beach FL 33401					
Purpose of Expenditure Media Production		Category/Type 004		Date of Disbursement or Obligation MM / DD / YYYY 08 / 15 / 2016	
Name of Federal Candidate: Bongino, Daniel, ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 164652.50			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Global Strike			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 22 / 2016
Mailing Address 224 Datur Street Suite 401			Amount 30000.00		Transaction ID : SE.4202
City State Zip Code West Palm Beach FL 33401					
Purpose of Expenditure Media Placement		Category/Type 004		Date of Disbursement or Obligation MM / DD / YYYY 08 / 22 / 2016	
Name of Federal Candidate: GOSS, CHAUNCEY, P, ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 194652.50			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures					30000.00
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Satterfield, David, , , Signature			[Electronically Filed]		Date MM / DD / YYYY 10 / 14 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 21 OF 26
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Constitutional Conservatives				FEC IDENTIFICATION NUMBER ▼ C C00620120	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Global Strike <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 22 / 2016		
Mailing Address 224 Datur Street Suite 401			Amount 1500.00		
City West Palm Beach	State FL	Zip Code 33401	Transaction ID : SE.4302		
Purpose of Expenditure Media Placement		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 08 / 22 / 2016		
Name of Federal Candidate: GOSS, CHAUNCEY, P, ,			Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL		
Calendar Year-To-Date Per Election for Office Sought 196152.50			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Global Strike <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 22 / 2016		
Mailing Address 224 Datur Street Suite 401			Amount 4908.75		
City West Palm Beach	State FL	Zip Code 33401	Transaction ID : SE.4306		
Purpose of Expenditure Media Placement		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 08 / 22 / 2016		
Name of Federal Candidate: Bongino, Daniel, ,			Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL		
Calendar Year-To-Date Per Election for Office Sought 201061.25			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			0.00		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Satterfield, David, ,</i>		[Electronically Filed]		Date MM / DD / YYYY 10 / 14 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 22 OF 26
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Constitutional Conservatives				FEC IDENTIFICATION NUMBER ▼ C C00620120	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	

Full Name of Payee Global Strike <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 22 / 2016		
Mailing Address 224 Datur Street Suite 401			Amount 4908.75		
City West Palm Beach	State FL	Zip Code 33401			
Purpose of Expenditure Media Placement		Category/ Type 004	Transaction ID : SE.4309 Date of Disbursement or Obligation MM / DD / YYYY 08 / 22 / 2016		
Name of Federal Candidate: GOSS, CHAUNCEY, P, , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL		
Calendar Year-To-Date Per Election for Office Sought 205970.00			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Global Strike <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 24 / 2016		
Mailing Address 224 Datur Street Suite 401			Amount 2500.00		
City West Palm Beach	State FL	Zip Code 33401			
Purpose of Expenditure Voter Telephone Communication		Category/ Type 004	Transaction ID : SE.4315 Date of Disbursement or Obligation MM / DD / YYYY 08 / 24 / 2016		
Name of Federal Candidate: Bongino, Daniel, , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL		
Calendar Year-To-Date Per Election for Office Sought 209128.58			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(a) SUBTOTAL of Unitemized Independent Expenditures	
(a) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Satterfield, David, , ,
Signature
[Electronically Filed]
Date MM / DD / YYYY
10 / 14 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 23 OF 26
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Constitutional Conservatives				FEC IDENTIFICATION NUMBER ▼ C C00620120	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Global Strike			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 24 / 2016
Mailing Address 224 Datur Street Suite 401			City State Zip Code West Palm Beach FL 33401		Amount 2500.00
Purpose of Expenditure Voter Telephone Communication			Category/Type 004		Transaction ID : SE.4316 Date of Disbursement or Obligation MM / DD / YYYY 08 / 24 / 2016
Name of Federal Candidate: GOSS, CHAUNCEY, P, ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 19 State: FL
Calendar Year-To-Date Per Election for Office Sought			211628.58		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee Gridiron Communications			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 24 / 2016
Mailing Address 3903 Portage Rd Suite C #262			City State Zip Code South Bend IN 46628		Amount 658.58
Purpose of Expenditure Voter List			Category/Type 004		Transaction ID : SE.4211 Date of Disbursement or Obligation MM / DD / YYYY 08 / 24 / 2016
Name of Federal Candidate: GOSS, CHAUNCEY, P, ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 19 State: FL
Calendar Year-To-Date Per Election for Office Sought			206628.58		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures					658.58
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Satterfield, David, , , Signature			[Electronically Filed]		Date MM / DD / YYYY 10 / 14 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 24 OF 26
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Constitutional Conservatives				FEC IDENTIFICATION NUMBER ▼ C C00620120	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on MM / DD / YYYY					
Full Name of Payee Sun Broadcasting Inc <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 29 / 2016		
Mailing Address 2824 Palm Beach			Amount 4908.75		
City Fort Myers	State FL	Zip Code 33916	Transaction ID : SE.4245		
Purpose of Expenditure Media Placement		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 08 / 29 / 2016		
Name of Federal Candidate: Bongino, Daniel, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL		
Calendar Year-To-Date Per Election for Office Sought 216537.33			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Sun Broadcasting Inc <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 29 / 2016		
Mailing Address 2824 Palm Beach			Amount 4908.75		
City Fort Myers	State FL	Zip Code 33916	Transaction ID : SE.4247		
Purpose of Expenditure Media Placement		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 08 / 29 / 2016		
Name of Federal Candidate: GOSS, CHAUNCEY, P, , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL		
Calendar Year-To-Date Per Election for Office Sought 221446.08			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			9817.50		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Satterfield, David, , ,			Date MM / DD / YYYY 10 / 14 / 2016		
[Electronically Filed]					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Constitutional Conservatives				FEC IDENTIFICATION NUMBER ▼ C C00620120	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee The Herald Group <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 12 / 2016		
Mailing Address 1800 M Street NW			Amount 15000.00		
City Washington	State DC	Zip Code 20036	Transaction ID : SE.4278		
Purpose of Expenditure Media Placement		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 08 / 12 / 2016		
Name of Federal Candidate: Bongino, Daniel, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL		
Calendar Year-To-Date Per Election for Office Sought 70032.50			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee The Herald Group <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 12 / 2016		
Mailing Address 1800 M Street NW			Amount 15000.00		
City Washington	State DC	Zip Code 20036	Transaction ID : SE.4284		
Purpose of Expenditure Media Placement		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 08 / 12 / 2016		
Name of Federal Candidate: GOSS, CHAUNCEY, P, , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL		
Calendar Year-To-Date Per Election for Office Sought 85032.50			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			0.00		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Satterfield, David, , ,</i>		[Electronically Filed]		Date MM / DD / YYYY 10 / 14 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 26 OF 26
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Constitutional Conservatives				FEC IDENTIFICATION NUMBER ▼ C C00620120	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on MM / DD / YYYY	
Full Name of Payee The Herald Group			<input checked="" type="checkbox"/> Memo Item		
Mailing Address 1800 M Street NW			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 15 / 2016		
City Washington	State DC	Zip Code 20036	Amount 5000.00		
Purpose of Expenditure Media Placement		Category/ Type 004	Transaction ID : SE.4293 Date of Disbursement or Obligation MM / DD / YYYY 08 / 15 / 2016		
Name of Federal Candidate: Bongino, Daniel, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL		
Calendar Year-To-Date Per Election for Office Sought 158652.50			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee The Traz Group			<input type="checkbox"/> Memo Item		
Mailing Address 18 Pendleton Court			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 29 / 2016		
City Medford	State NJ	Zip Code 08055	Amount 19149.67		
Purpose of Expenditure Voter Outreach		Category/ Type 004	Transaction ID : SE.4248 Date of Disbursement or Obligation MM / DD / YYYY 08 / 29 / 2016		
Name of Federal Candidate: GOSS, CHAUNCEY, P, ,			Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL		
Calendar Year-To-Date Per Election for Office Sought 240595.75			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			19149.67		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures			122245.75		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Satterfield, David, , ,</i>		[Electronically Filed]		Date MM / DD / YYYY 10 / 14 / 2016	